

2012 SEP -6 AM 11: 28

Committee Name:

SÉLECT OUR AMÉRICA

if registered, FEC ID:

Today's Date:

8/24/2012

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization-Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

DENNETS BATES EMORY

Treasurer's Name:

. Treasurer

Jack Grund

12050882442

FEC

STATEMENT OF

FORM 1	ORGANIZATION	KECEIVE()	
		2012 SEP - Stilling Hally 26	
1. NAME OF COMMITTEE (in full	(Check if name Example: If typing, type is changed) over the lines.	12FE4M5 FEC MAIL CENTER	
3/6/6/6/CTT 101	UP ANERTCA		
			
ADDRESS (number and st	treet) 4648 VIIA CLARTICE		
(Check if address is changed)	ess		
	CITYA	STATE A ZIP CODE A	
COMMITTEE'S E-MAIL A	ADDRESS		
(Check if address is changed) (Check if address is changed) (Check if address is changed)			
	Optional Second E-Mail Address SELECITOURAMERITICAGEN	MATICION INTERNAL	
COMMITTEE'S WEB PAG	GE ADDRESS (URL)		
(Check if address is changed)		<u></u>	
2. DATE 08	29 2012		
3. FEC IDENTIFICATION	ON NUMBER >		
4. IS THIS STATEMEN	NEW (N) OR AMENDED (A)		
I certify that I have exam	nined this Statement and to the best of my knowledge and belief it	t is true, correct and complete.	
Type or Print Name of Tr	reasurer DENNIS BHTES EMORY	······································	
Signature of Treasurer	U. Bothsh	Date UB Z4 Z012	
NOTE: Submission of false	e, erroneous, or incomplete information may subject the person signing ANY CHANGE IN INFORMATION SHOULD BE REPORTED V		
Office Use	For further information of Federal Election Commiss Toll Free 800-424-9530	PEL ELIBINI	

5.

TYPE OF COMMITTEE						
Candidate Committee:						
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)				
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
Name Cand						
Candidate Party Affiliatio		Office Sought: House Senate President District				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name Cand						
Part	y Con	nmittee:				
(d)	رتان زنگ	This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.				
Polif	ical A	ction Committee (PAC):				
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a				
		Corporation Wo Capital Stock Labor Organization				
		Membership Organization Trade Association Cooperative				
		In addition, this committee is a Lobbyist/Registraol PAC.				
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party				
		committee. (i.e., nonconnected committee) In addition, this committee is a Lobbyist/Registrant PAC.				
		In addition, this committee is a Lobbyist/Registrant PAC. In addition, this committee is a Leadership PAC. (Idontify sponser on line 6.)				
Join!	t Fund	Iraising Representative:				
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.				
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.				
	Committees Participating in Joint Fundraiser					
	1.	Collination of the land of the				
	2.	FEC ID number C				
	3.	FEC ID number C				
	4.	FEC ID number				

ı	FEC Form 1 (Revised (02/2009)	Page 3
Wi	rite or Type Committee Name	3	
 6.	Name of Any Connected C	Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadership I	PAC Sponsor
1 1			1111
L	Mailing Address	1	1111
	Maining Address		1111
		CITY STATE ZIP	CODE
	Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative Leaders	snip PAC Sponsoi
1	books and records.	ntify by name, address (phone number optional) and position of the person in possess TAIS TAL EMORY	
	Mailing Address	4648 VIA CLARICE	
	Maining Marieso		
		SAUTA BARBARA CA 931/1	· 1-1
	Title or Position		CODE
	THE OF FUSION	OITI SINIE ZII	OODL
		Telephone number 8 0 5 - 2 0 1	1-7865
	Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; and the name a assistant treasurer).	and address of
	Full Name of Treasurer	NIS BATES EMORY	1111
ı	Mailing Address	4648 MEA CLARECE	
		SANTA BARBARA CA 9311	
	Title or Position	CITY STATE ZIP	CODE
		Telephone number 8.05 - 683	6325

CITY

STATE

ZIP CODE

TIGBERS TAL EMORY

FEC Form 1 (Revised 02/2009)

Full Name of Designated

Mailing Address

Agent

	Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.			
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USPS Express Mail	Postmarked			
Postmark Illegible				
No Postmark				
Overnight Delivery Service (Specify): FEDEX	Shipping Date			
Next Business	s Day Delivery			
Received from House Records & Registration Office	Date of Receipt			
Received from Senate Public Records Office	Date of Receipt			
Received from Electronic Filing Office	Date of Receipt			
Other (Specify):	eceipt or Postmarked			
PREPARER	9/6/12 DATE PREPARED			
(3/2005)	DATE PREPARED			